

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	smc		3/9/00
O.I.P.E. CLASSIFIER			17-26
FORMALITY REVIEW		66500	6/13
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	2/6/03	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	0	0	
6	0	0	
7	0	0	
8	0	0	
9	✓	✓	
10	✓	✓	
11	✓	✓	
12	✓	✓	
13	0	0	
14	0	0	
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17	✓	✓	
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If more than 150 claims or 10 actions  
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